Commonwealth of Massachusetts City of Newton

Statement of Discontinuance, Withdrawal from, or Deceased from Business or Partnership

hereby declare that the	ne Provisions of Massachusetts General Law ne individual(s) listed below is(are) deceased s; or the business has been discontinued	± :	
Business Name:			
Location of Business	:	- ificate)	
as set forth in the cer	tificate filed in the City Clerk's Office on:(a	Book:Book:	Page:
The full name and ad	dress of each person conducting such busine	ss:	
1			
Name	Address	Signed	
2Name	Address	Signed	
3			
Name	Address	Signed	
Signature of Executo	r/Administrator of Estate if Deceased		
	the above named person(soregoing statement is true.	s) personally appeared beforeal)	ore me and
Notar	y Public	on Expires:	
This business was dis	continued on:Date		